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APPLICANTS

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** CONTINUING DATA ***** M6B
 This appln claims benefit of 60/303,694 07/06/2001

** FOREIGN APPLICATIONS ***** M6B

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 12/26/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <u>AG. Bat</u> Examiner's Signature Initials	STATE OR COUNTRY OH	SHEETS DRAWING 6	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 5
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ADDRESS

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TITLE

Urinary flow control valve

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)